PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN			Attorney Docket	Number	2:	2253-67116 P	CT US	
	PATENT APPI (37 CFR		ON	First Named Inve	ntor	C	IVAN	
	Declaration Submitted	☑ Declaration	ion	COMPLETE IF KNOWN				
_			ed after Initia	Application Number	-	T	10/009,58	1
	with Initial	Filing (surcharge (37 CFR 1.16(e) required		Filing Date	- ii		06 November	2001
]	Filing			Group Art Unit				
				Examiner Name				
As a	below named inventor, I h	ereby decl	are that:					
Му і	esidence, mailing address, a	nd citizensh	nip are as sta	ted below next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHODS FOR CONTROLLING INTRAOCULAR PRESSURE								
		0D2 FOI	CONTR	OLLING INTRAUCC	LARPR	こうろい	JKE	
the s	pecification of which							
	☐ is attached hereto							
	OR .							
was filed on 05/08/2000 as United States Application Number or PCT International Application Number PCT/US00/12551 and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT internatinal application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application			Foreign Filing Date	Priority Not Claimed		Certified Copy	Attached?	
	Number(s)	Cou	ntry	(MM/DD/YYYY)	Not Clair	mea	YES	NO
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s) Filing Date (MM/DD/YYYY)								
		05/07/19			Additional provisional application numbers are listed on a supplemental priority data sheet			
				PTO/SB/02B attached hereto.				
[Page 1 of 2]								

[Page 1 of 2]

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DECLARATION - Utility or Design Patent Application							
Direct all correspondence to: Customer Number 27730 OR Correspondence address below							
Name Evelyn H. McConathy, Esquire							
Address Dilworth Paxon LLP	110						
Address 3200 Mellon Bank Center, 1735 Market Street							
City Philadelphia		State P	<u>A</u>	Zip 19	103		
Country	Tel	ephone		Fax			
POWER OF ATTORNEY I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Evelyn H. McConathy Reg. No. 35,279							
[] I hereby appoint the practitioner(s) associated with Customer Number to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. [] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to							
DECLARATION I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR Given Name (first and middle [if any])	□ A pet	ition has been	Family Name or				
Mortimer M	C	VAN			*		
Inventor's Signature	* 4	liva		Date 11/6/	2001		
Residence: City 1238 Knox Road P4.	State	PA	Country US	Citizenship	US		
Mailing Address							
Mailing Address	T		40000				
City Wynnewood	State	PA	zip 19096	Country US			
NAME OF SECOND INVENTOR: Given Name (first and middle [if any]) A petition has been filed for this unsigned inventor Family Name or Sumanne							
MACKNIGHT Anthony D.							
1	A	11110111					
1	A			Date			
MACKNIGHT	State		Country NZ	Date Citizenship	NZ		
MACKNIGHT Inventor's Signature	T		Country NZ		ΝZ		
MACKNIGHT Inventor's Signature Residence: City 6 Tui Street	T		Country NZ				



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DESIC	GN						
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	☑ Declaration		COMPLETE IF KNOWN				
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with Initial		Filing Date		06 November			
Filing		Group Art Unit					
		Examiner Name					
As a below named inventor, I h	pereby declare that:			-			
	•	4- d b alasse manet to mass mana					
My residence, mailing address, a	• •	•					
I believe I am the original, first a names are listed below) of the su	bject matter which is cla	nimed and for which a paten	t is sought on the	invention entitled:			
METH	ODS FOR CONTR	ROLLING INTRAOCU	ILAR PRESS	URE			
the specification of which							
☐ is attached hereto							
OR							
was filed on 05/08/2000 as United States Application Number or PCT International Application Number PCT/US00/12551 and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewe amended by any amendment spe			d specification, in	cluding the claims	s, as		
I acknowledge the duty to disclo continuation-in-part applications the national or PCT international	, material information w	hich became available betw					
I hereby claim foreign priority be certificate, or 365(a) of any PCT America, listed below and have a certificate, or any PCT internation	international applicationals identified below, by	n which designed at least on checking the box, any forei	e country other th gn application for	an the United State patent or inventor	es of r's		
Prior Foreign Application	G	Foreign Filing Date	Priority	Certified Copy Attached			
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO		
		•					
Description of the state of the							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s) Filing Date (MM/DD/YYYY)							
		999 –	numb suppl	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			
		[Page 1 of 2]					

[Page 2 of 2]

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Direct all correspondence to: Customer Number 27730 OR Correspondence address below							
Name Evelyn H. McConathy, Esquire							
Address Dilworth Paxon LLP							
Address 3200 Mellon Bank Center, 1735 Market Street							
City	Philadelphia	State PA			Zip <u>19103</u>		
Country		Telephone			Fax		
POWER OF ATTORNEY							
I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:							
	Evelyn H. Mc	Conathy	Reg.	No. 35,279			
[] I hereb transac	y appoint the practitioner(s) associated tall business in the Patent and Tradem	with Custon ark Office c	mer Number onnected the	to prosecu	te this application and to		
[] Attach	ed, as part of this Declaration and Power and follow instructions from my repres	er of Attorno entative(s).	ey, is the auth	orization of the abov	re-named practitioner(s) to		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may isopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR A petition has been filed for this unsigned inventor							
Given Name (firs Mortimer M	t and middle (if anyl)	CIV	/AN	Family Name or	Sumanc .		
Toventor's Signa					Date		
Residence: City	State	PA	Country US	Citizenship US			
Mailiag Address							
Mailing Address		·		,			
City Wyr	newood	State F	PA	zip 19096	Couptry US		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any)) Family Name or Sumame Anthony D.							
Inventor's Signa	V 4	L'A			Pate VPA & Son!		
Residence: City	6 Tot Street HZX	State		Country NZ	Citizenship NZ		
Mailing Address Saint Leonards							
Mailing Address							
Ciry	Dunedin	State Zip			Country NZ		
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto							